

I would like to request a name change to my Charter Certificate as follows:

Current Certificate Name: ***Ranky Tanky Transit LLC***

New Certificate Name: ***TC's Medical Transit LLC***

Certificate Type: ***Class C Non-Emergency***

Certificate Number: ***9638***

Docket Number: ***2021-319-T***

Thank you,

Thelma Cohen,

843-200-8475

RECEIVED

JAN 25 2022

**PSC SC
MAIL / DMS**

Schmieding, Janice

From: Thelma Cohen <thelmacohen68@gmail.com>
Sent: Monday, January 24, 2022 11:06 AM
To: Schmieding, Janice
Subject: Re: [External] Name Change Request for Charter Certificate...
Attachments: TC's Medical Transit LLC_01.pdf; TC's Medical Transit LLC_DownloadedDocument_02.pdf

A copy of my Papers from the State. Thanks.

On Tue, Jan 18, 2022 at 12:20 PM Thelma Cohen <thelmacohen68@gmail.com> wrote:
 Ok, thank you.

On Tue, Jan 18, 2022 at 11:53 AM Schmieding, Janice <Janice.Schmieding@psc.sc.gov> wrote:

Ms. Cohen,

Before your request can be processed, you will need to submit the new "LLC" papers issued by the SC Secretary of State's Office reflecting the new name.

Janice

From: PSC_Contact <Contact@psc.sc.gov>
Sent: Tuesday, January 18, 2022 11:41 AM
To: Schmieding, Janice <Janice.Schmieding@psc.sc.gov>
Subject: FW: [External] Name Change Request for Charter Certificate...

From: Thelma Cohen <thelmacohen68@gmail.com>
Sent: Tuesday, January 18, 2022 10:22 AM
To: PSC_Contact <contact@psc.sc.gov>
Subject: [External] Name Change Request for Charter Certificate...

Hello,

CERTIFIED TO BE A TRUE AND CORRECT COPY
AS TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

Jan 24 2022
REFERENCE ID: 954329


SECRETARY OF STATE OF SOUTH CAROLINA

STATE OF SOUTH CAROLINA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION
Limited Liability Company – Domestic

Filing ID: 220115-2121435

Filing Date: 01/14/2022

The undersigned delivers the following articles of organization to form a South Carolina limited liability company pursuant to S.C. Code of Laws Section 33-44-202 and Section 33-44-203.

1. The name of the limited liability company (Company ending must be included in name*)

TC's Medical Transit LLC

*Note: The name of the limited liability company must contain one of the following endings: "limited liability company" or "limited company" or the abbreviation "L.L.C.", "LLC", "L.C.", "LC", or "Ltd. Co."

2. The address of the initial designated office of the limited liability company in South Carolina is
3265 Cohen Hill Rd

(Street Address)

Johns Island, South Carolina 29455

(City, State, Zip Code)

3. The initial agent for service of process is

United States Corporation Agents, Inc.

(Name)

(Signature of Agent)

And the street address in South Carolina for this initial agent for service of process is:
1591 Savannah Highway, Ste 201

(Street Address)

Charleston

(City)

South Carolina 29407

(Zip Code)

4. List the name and address of each organizer. Only one organizer is required, but you may have more than one.

(a)

Cheyenne Moseley

(Name)

101 N. Brand Blvd 11th Fl

(Street Address)

Glendale, California 91203

(City, State, Zip Code)

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Jan 24 2022

REFERENCE ID: 954329

Mark Hammond
SECRETARY OF STATE OF SOUTH CAROLINA

TC's Medical Transit LLC

Name of Limited Liability Company

(b)

(Name)

(Street Address)

(City, State, Zip Code)

5. ☐ Check this box only if the company is to be a term company. If the company is a term company, provide the term specified. _____

6. ☐ Check this box only if management of the limited liability company is vested in a manager or managers. If this company is to be managed by managers, include the name and address of each initial manager.

(a)

(Name)

(Street Address)

(City, State, Zip Code)

(b)

(Name)

(Street Address)

(City, State, Zip Code)

7. ☐ Check this box only if one or more of the members of the company are to be liable for its debts and obligations under Section 33-44-303(c). If one or more members are so liable, specify which members, and for which debts, obligations or liabilities such members are liable in their capacity as members. This provision is optional and does not have to be completed.

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8. Unless a delayed effective date is specified, these articles will be effective when endorsed for filing by the Secretary of State. Specify any delayed effective date and time _____.

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Jan 24 2022

REFERENCE ID: 954329


SECRETARY OF STATE OF SOUTH CAROLINA

TC's Medical Transit LLC

Name of Limited Liability Company

9. Any other provisions not consistent with law which the organizers determine to include, including any provisions that are required or are permitted to be set forth in the limited liability company operating agreement may be included on a separate attachment. Please make reference to this section if you include a separate attachment.

10. Each organizer listed under number 4 must sign.

Cheyenne Moseley

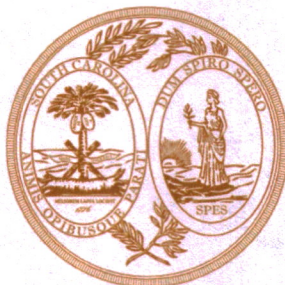
Signature of Organizer

Date: 01/14/2022

Signature of Organizer

Date:

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

TC's Medical Transit LLC, a limited liability company duly organized under the laws of the State of South Carolina on January 14th, 2022, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 24th day of January, 2022.


Mark Hammond, Secretary of State